AZ Form (Rev. 1/2015) TRANSCRIPT ORDER					DUE DATE:	
1. NAME				2. PHONE NUMBER	3. DATE	
4. FIRM NAME					I	
5. MAILING ADDRESS				6. CITY	7. STATE	8. ZIP CODE
9. CASE NUMBER 10. JUDG				DATES OF	PROCEEDINGS	
				11.	12.	
13. CASE NAME					OF PROCEEDINGS	
16. ORDER FOR				14.	15. STATE	
APPEAL CRIMINAL			CRIMINAL JUSTICE ACT BANKRUPTCY			
NON-APPEAL CIV				IN FORMA PAUPERIS	OTHER (Specify)	
17. TRANSCRIPT	REQUESTED (Speci	fy portion(s) and	d date(s) of proceeding(s) f	or which transcript is requested.)		
PORTIONS			DATE(S)	PORTION(S)	DA	ΓE(S)
VOIR DIRE				TESTIMONY (Specify)		
OPENING ST	ATEMENT (Plaintiff)				
OPENING STATEMENT (Defendant)						
CLOSING ARGUMENT (Plaintiff)				PRE-TRIAL PROCEEDING		
CLOSING AR	RGUMENT (Defendar	nt)				
OPINION OF COURT						
JURY INSTR	UCTIONS			OTHER (Specify)		
SENTENCING						
BAIL HEARI	NG					
18. ORDER	ORIGINAL + 1		т # О F			
CATEGORY	(original to Cour	t, COP	ADDITIONAL	DELIVERY INSTRUCTIONS (Check all that apply.)	ESTIMAT	ED COSTS
30 DAYS				PAPER COPY		
14 DAYS				PDF (e-mail)		
7 DAYS				A SCIL (a mail)		
DAILY				ASCII (e-mail)		
HOURLY						
REALTIME						
CERTIFICATION (19. & 20.) By signing below, I certify that I will pay all charges (deposit plus additional).				E-MAIL ADDRESS		
19. SIGNATURE				NOTE: IF ORDERING MORE THAN ONE FORMAT, THERE WILL BE AN ADDITIONAL CHARGE.		
20. DATE						
TRANSCRIPT TO BE PREPARED BY				ESTIMATE TOTAL		
ORDER RECEIVED		DAT	Е ВҮ	PROCESSED BY	PHONE NUM	IBER
DEPOSIT PAID				DEPOSIT PAID		
TRANSCRIPT ORDERED				TOTAL CHARGES		
TRANSCRIPT RECEIVED				LESS DEPOSIT		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT				TOTAL DUE		

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